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Complete if Known Substitute for form 1449/PTO **Application Number** 10/531958 OI . O6 . 2006 Akio TOSHIMA Filing Date INFORMATION DISCLOSURE **First Named Inventor** STATEMENT BY APPLICANT Art Unit 2893 (Use as many sheets as necessary) /Tuyen Tra/ **Examiner Name Attorney Docket Number** 38195.74 Sheet

U.S. PATENT DOCUMENTS							
Examiner Initials*	Cite No. ¹	Document Number Number-Kind Code ^{2(if known)}	Publication Date MM -YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear		
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Examiner	/Ta Tue/	Date	11/08/2007
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